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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: :  
Bruce A. Rogers :  
Application No.: 10/764,237 :  
: Group Art Unit:3732  
Filed: January 23, 2004 :  
: Examiner: S. L. Willatt  
For: :  
: Attorney Docket No.:08859-0009A :  
:

I, John F. Letchford, Registration No. 33,328, certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 14, 2005.

John F. Letchford

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450


Sir:

REQUEST FOR WITHDRAWAL AS ATTORNEY

Enclosed herewith is a request by the undersigned to withdraw as Attorney of record in the above-referenced application.

Respectfully submitted,

Date: July 14, 2005



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John F. Letchford  
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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10/764,237
Filing Date	January 23, 2004
First Named Inventor	Bruce A. Rogers
Art Unit	3732
Examiner Name	S.L. Willatt
Attorney Docket Number	08859-0009A

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☐ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: The client has indicated to me that he is unable to pay my fees for legal services going forward.

**CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ The address associated with Customer Number: **OR**

<input checked="" type="checkbox"/> Firm or Individual Name	Bruce A. Rogers				
Address	715 North Sixth Street Apartment 3F				
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Signature					
Name	John F. Letchford			Registration No.	33,328
Date	July 14, 2005			Telephone No.	856-354-3013

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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